# Division of Corporations Division of Corporations **Electronic Filing Cover Sheet**

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(((H12000194083 3)))



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ASSOCIATED TAX CONSULTANTS GROUP, INC.

Account Number: I20110000056

Phone

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN EL RINCON PINARENO CAFETERIA, CORP.

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Certified Copy	.,		·	0
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AUG - 3 2012

T. BROWN



August 2, 2012

### FLORIDA DEPARTMENT OF STATE

EL RINCON PINARENO CAFETERIA, CORP. Division of Corporations 409 E OKEECHOBEE RD HIALEAH, FL 33010

SUBJECT: EL RINCON PINARENO CAFETERIA, CORP.

REF: P11000084674

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

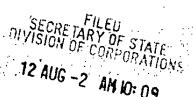
The document must also contain the address of the registered agent which must be at a Florida street address.

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown Regulatory Specialist II FAX Aud. #: H12000194083 Letter Number: 312A00020026

Articles of Incorporation of



### EL RINCON PINARENO CAFETERIA

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

			The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or "Co	". A professional corporat	ated" or the abbreviation ion name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
			<del></del>
			<del></del>
D. If amending the registered agent an new registered agent and/or the ne	d/or registered office addres v registered office address:	t in Florida, enter the name	of the
	d/or registered office addres v registered office address: BARBARA NOELVY		of the
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	v registered office address:	MOSQUERA DIAZ	of the
new registered agent and/or the ne	v registered office address: BARBARA NOELVY	MOSQUERA DIAZ	of the
new registered agent and/or the ne	BARBARA NOELVY 1215 W 2ND AVE (Florida street	MOSQUERA DIAZ	

Signature of New Registered Agent, if changing

(Attach additional she Please note the officer P = President; V = Vi Executive Officer; CF held President, Treas Changes should be no	ets, if necessary) /director title by to the President; T= TO = Chief Finantier, Director wo ted in the following leaves the corporove, and Sally Sm	cial Officer. If an officer/director holds mor uld be PTD. ng manner. Currently John Doe is listed as th ation, Sally Smith is named the V and S. Thes with, SV as an Add.	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office re PST and Mike Jones is listed as the V. There is e should be noted as John Doe, PT as a Change,
X Add	SV Sell	<u>y Smîth</u> :	
Type of Action (Check One)	_Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	OSMANI RAMIREZ	409 E OKEECHOBEE RD
Add	, •		HIALEAH FL 33010
XX Remove			
2) Change	PD	BARBARA NOELVY MOSQUERA DIAZ	1215 W 2ND AVE # 3
XX Add	•		HIALEAH FL 33010
Remove		•	
3) Change			
Add			
Remove			
4) Change			
Add		,	
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5)Change			<u></u>
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Remove	•		, <u></u>
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6)Change	<del></del>		
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Page 2 of 4

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E. If amending or adding additional a (Attach additional sheets, if necessar,	v). (Be specific)			and the second	
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F. If an amendment provides for an e provisions for implementing the s	exchange, reclassific	ation, or cancell	ation of issue	d shares.	
(if not applicable, indicate N/A	)	MININES IN LIES N	mendinent us	<u>=111 •</u>	
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The date of each amendmen	t(s) adoption: 0//23/2012
Effective date if applicable:	07/23/2012
Adoption of Amendment(s)	(no more than 90 days after amendment file date).
□ The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
The amendment(s) was/we	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Dated_07/	/23/2012
S	By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	BARBARA NOELVY MOSQUERA DIAZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)